

Mastitis:

If you are overly full and feel engorged, infection or *mastitis* can occur. This may be due to milk is not moving out. You could feel an area of your breast warm, red, painful and feeling like the flu.

- ♦ Call your doctor immediately for antibiotic treatment. Finish all medication.
- ♦ Continue nursing frequently from both breasts. You must empty your breasts well.
- ♦ Using an electric pump before breastfeeding can help soften the breast so your baby can latch better. It can also help to get your milk out and flowing and can be used between feedings. Call WIC for a loaner pump.
- ♦ Nurse on the good breast until milk starts to flow. Then change to the breast with mastitis and nurse until it is well drained.
- ♦ Warm compresses help before and during breastfeeding / pumping. Cold packs after to soothe.
- ♦ Rest as much as possible. Drink plenty of fluids.
- ♦ Call your WIC counselor to discuss how to prevent this from happening again. Not nursing frequently, a decrease or change in feeding schedule, too long between feeds, sick baby are all possible reasons.

Thrush:

Thrush is a yeast infection that can be passed between baby and mother (can happen when baby was on antibiotics). Mom's nipples may become red or they may look normal. Burning sore nipples or shooting/stabbing pain that begins at the nipple and moves deep into the breast are common symptoms. Baby may have white patches on the tongue, lips, or cheeks, or a bright red diaper rash.

- ♦ Call doctor immediately for treatment of both you and your baby (cream for nipples and also for baby's mouth).
- ♦ Begin nursing on the breast that is less sore.
- ♦ Always break the baby's suction when switching breasts.
- ♦ Boil all objects that your baby has put in his mouth (toys, pacifiers, teethingers) for 20 minutes daily.
- ♦ Make sure to wash your hands after every diapering.

In all cases, if the condition persists or worsens, contact your doctor or the WIC office immediately.

Breastfeeding Concerns and Solutions

During your first weeks together, both you and your baby are learning and adjusting to a new way of life. There can be difficulties when starting any new relationship, so don't be alarmed if you hit a few snags along the way. Here are some ideas to help you with common breastfeeding problems that you may have.



WIC Breastfeeding Counselor: _____
Phone Number: _____

WIC CO/UT 04

Ensuring a Good Milk Supply:

“Do I have enough milk?” This is a good question most moms ask. Your body is designed to make plenty of milk. After all, you made your baby – and that was the hard part! When you find yourself asking this question, this is the time to call your WIC breastfeeding counselor. She will review “Supply and Demand” and the below information so you know you are on track! The key is to have a good latch and nurse frequently. You can then build a good milk supply. If you give formula, you *will* make less milk!

- ◆ Nurse every 1½ -3 hours
- ◆ You want active sucking and swallowing during this time. Not a sleepy baby with breast in mouth, who is not transferring the milk from you. (This usually takes *about* 10-15 minutes on each side, or *about* 20 or so on one side)
- ◆ Make sure baby has a good latch-on and is positioned correctly. If you are sore, this may be a sign of a poor latch. Call your doctor or WIC clinic!
- ◆ Provide breast milk only. No solids or other liquids are needed for the first 4-6 months.
- ◆ Increase breastfeeding to meet baby’s demand during growth spurts. They often occur at 2-3 weeks, 6 weeks, and 3 months

Engorgement: Engorgement is when your breasts become overfull with milk. This can occur in the first few days after delivery. The breasts become larger and full and can be painful and lead to mastitis if not managed. Call your breastfeeding counselor! To prevent or relieve engorgement:

- ◆ Nurse more frequently.
- ◆ Fill a clean sink with warm water and rest your breasts inside while gently massaging. Or use a warm pack before nursing.
- ◆ Gently hand express, or pump a small amount of milk to soften breasts to help baby latch-on easier.
- ◆ Use a cold pack after feedings to comfort.
- ◆ Do not use bottles or pacifiers when your breasts are engorged. Different kinds of nipples can confuse a baby.
- ◆ Engorgement should disappear by the end of the first week. This is normal and does not mean you are losing your milk.

Leaking: Some women leak during the first couple months. If you experience leaking you can:

- ◆ Press the palm of your hand firmly to your nipple or cross your arms across your chest. Leaking is usually temporary.
- ◆ Use nursing pads. Avoid pads with plastic liners.

Sore Nipples:

Some mild discomfort is normal during the first few days. Nipple pain or severe soreness with feedings is usually a sign of poor positioning or latch-on. Try the following to prevent or relieve sore or cracked nipples:

- ◆ Try holding your baby in different positions.
- ◆ Make sure the baby takes a large mouthful of your breast, not just the tip of your nipple. Your baby’s mouth should be opened wide with lips turned out.
- ◆ Begin nursing on the breast that is less sore.
- ◆ Express or pump enough milk before a feeding to stimulate your milk flow.
- ◆ Wash nipples with water (avoid soaps, lotions or oils.)
- ◆ Use lanolin if nipples become dried or cracked.
- ◆ Practice slow, deep breathing to help you relax before latching your baby.
- ◆ Use short, frequent feedings. Make sure you are not engorged.
- ◆ After feedings, air-dry your nipples or pat dry with a clean towel.
- ◆ Protect your nipples by using breast shells.

Sleepy Baby:

Delivery can be tiring for both you and your baby. You may need to wake your baby to feed if he is not demanding to eat at least every 3 hours. Try the following tips:

- ◆ Remove or loosen your baby’s blanket.
- ◆ Remove baby’s clothes.
- ◆ Talk to and make contact with your baby.
- ◆ Rub baby’s hands, feet, back, and bottom.
- ◆ Change your baby’s diaper.
- ◆ Give your baby a bath or a massage.
- ◆ Express milk onto your baby’s lips.
- ◆ Burp your baby.
- ◆ Use a cool damp cloth on baby’s head, hands or feet.



Plugged Ducts:

A plugged duct feels like a tender hard knot. Plugged ducts occur when milk is not draining well.

- ◆ Nurse more often, beginning on the breast with the plugged duct.
- ◆ Change your nursing positions.
- ◆ Place a warm washcloth on the plugged duct or take a warm shower. Gently massage breast to help drain the plugged duct.
- ◆ Wear a bra that fits well and is not too tight.
- ◆ Pump or express remaining milk after feeding.
- ◆ Do not skip feedings.

